

# CLAIMS ONLY

Application Number

101726737

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		May be used for additional claims or amendments						
	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1													
2													
3													
4													
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45													
46													
47													
48													
49													
50													
Total													
Indep	8												
Total	27												
Depend													
Total	35												
Claims	21												
	56												

51													
52													
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90													
91													
92													
93													
94													
95													
96													
97													
98													
99													
100													
Total													
Indep	1												
Total	20												
Depend													
Total	21												
Claims													

Total  
Indep  
Total  
Depend  
Total  
Claims

1  
20  
21

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	Indep	Depend	Indep	Depend	Indep	Depend		Indep	Depend	Indep	Depend	Indep	Depend
1													
2							51						
3							52						
4							53						
5							54						
6							55						
7							56						
8							57						
9							58						
10							59						
11							60						
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41							90						
42							91						
43							92						
44							93						
45							94						
46							95						
47							96						
48							97						
49							98						
50							99						
Total							100						
Indep							Total						
Total							Indep						
Depend							Total						
Total							Depend						
Claims							Total						
							Claims						